# Precision Medicine Impacting Cancer Care

Acquired Genetic/Epigenetic Defects
Diagnostics
Therapeutics
Immunotherapeutics

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#### **Disclosures**

#### Member

Cancer Scientific Advisory Council, AbbVie Inc. Scientific Advisory Board, ProQuest Investments, Inc. Board of Directors, CHD Biosciences Co-Founder, Digital Harmonics

#### **Ad Hoc Consultant**

GlaxoSmithKline Inc., Merck and Co., Jannsen Pharmaceuticals Inc., many others

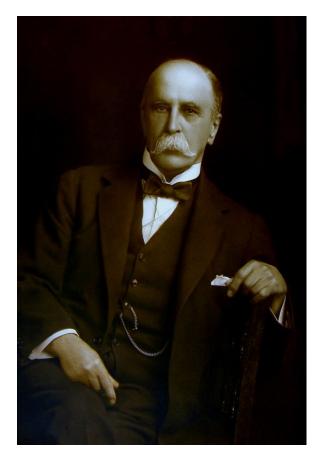
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## Individualized Health, Precision Medicine, and Cancer

"Variability is the law of life, and as no two faces are the same, so no two bodies are alike, and no two individuals react alike and behave alike under the abnormal conditions which we know as disease."



Sir William Osler 1849 -1919

### The Human Genome: Similarities and Differences among Individuals



Human genome size:

♀ 3,117,838,593 base pairs (6 feet)

23 Chromosomes

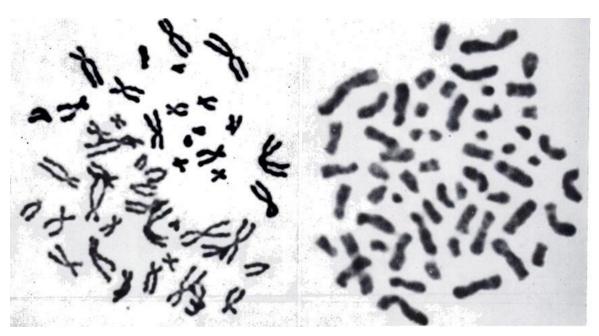
19-20,000 protein-coding genes

Different individuals:

99.9% identical

1 in every 1000 base-pairs are different (>3,000,000 differences between Individuals)

#### Corruption of the Cancer Genome/Epigenome: Known for >5 Decades to be at the Root of Cancer



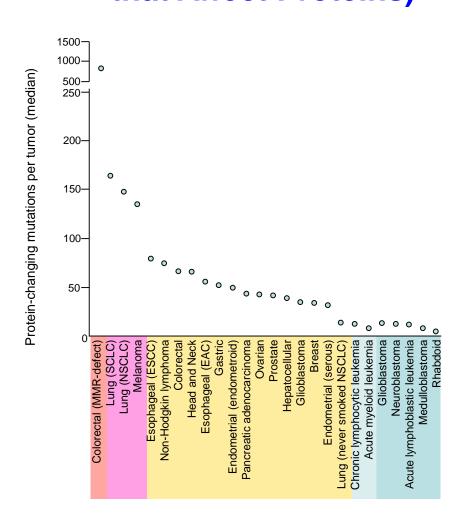
normal bone marrow

acute lymphocytic leukemia

#### Cancer karyotype

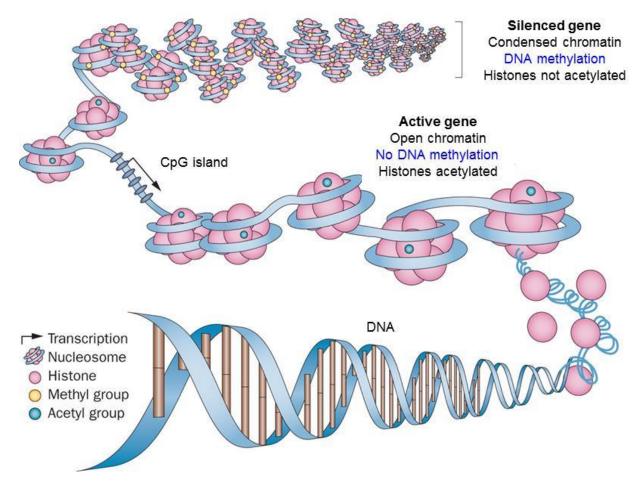
- too many chromosomes
- abnormal chromosomes
- "fuzzy" chromosomes (poor condensation)

# Human Cancers have Many Acquired Gene Defects: eg. Mutations (Changes in DNA Sequence that Affect Proteins)



### Human Cancers also have Many Acquired Defects in Gene Function (Epigenetic):

#### eg. DNA Methylation Changes Affecting Protein Expression



Azad N et al. Nat Rev Clin Oncol 10: 256-66 (2013)

#### **Somatic Gene Defects in Human Cancers**

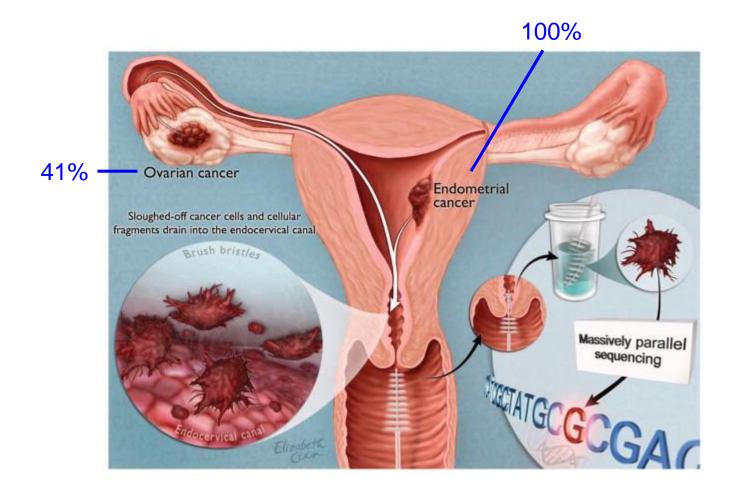
	Genetic	Epigenetic	
Number of somatic alterations in each cancer case	10-10 <sup>4</sup>	10 <sup>3</sup> -10 <sup>4</sup> (Hypermethylation)	
Number of alterations that are "drivers" versus "passengers"	1-10 <sup>2</sup>	Majority or all (Hypermethylation)	
Heterogeneity in somatic changes	Mutations: Cell-to-cell: High Lesion-to-lesion: High Case-to-case: High  Other Defects: Cell-to-cell: High Lesion-to-lesion: High Case-to-case: High	Hypermethylation: Cell-to-cell: Low Lesion-to-lesion: Low Case-to-case: Medium  Hypomethylation: Cell-to-cell: High Lesion-to-lesion: High Case-to-case: High	
Rate of accumulation in cancer cells	10 <sup>-9</sup> /cell each division or higher	Unknown	
Number of alterations that can be therapeutically targeted	1-3	All?	

<sup>\*</sup>Vogelstein B et al. Science 339:1546-58 (2013); Bozic I et al. eLife 2: e00747 (2013)

### **Diagnostics**



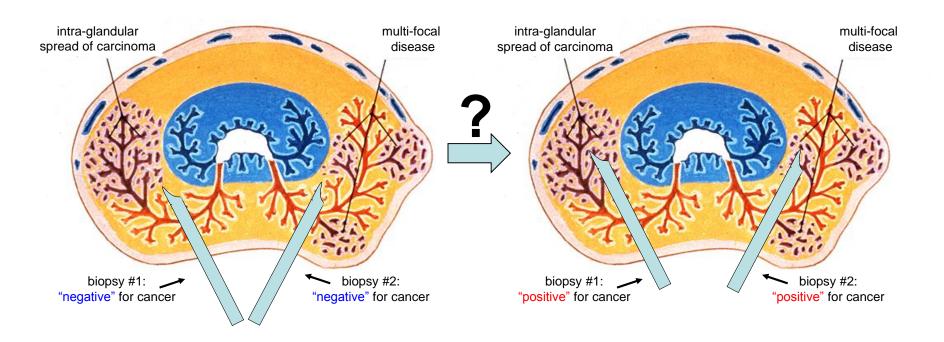
### Can a DNA Sequencing-Based Test Provide an Opportunity to Screen for Ovarian and Endometrial Cancers Using PaP Smears?



### Can a DNA Methylation Test Improve Upon Patterned Core Biopsy Sampling of the Prostate?

Unmet medical need: as many as 25% of men or more with an initial "negative" prostate biopsy have cancer on a subsequent biopsy.\*

Can a DNA methylation test predict which men need a second prostate biopsy procedure and which men do not?



\*Andriole GL et al. New Engl J Med 362: 1192-202 (2010)

# United States Food and Drug Administration Approval of a DNA Methylation Test for Prostate Cancer: Pivotal Registration Trial Data\*

Investigators	Study	Number of Men	Odd Ratio for Cancer on Second Biopsy	Negative Predictive Value
Steward GD <i>et al.</i> (2013)	MATLOC	498	3.17 (95% CI of 1.81-5.53)	90% (95% CI of 87-93)
Partin AW <i>et al.</i> (2014)	DOCUMENT	350	2.69 (95% CI of 1.60-4.51)	88% (95% CI of 85-91)



\*Steward GD et al. J Urol 189: 1110-6 (2013) Partin AW et al. J Urol 192: 1081-7 (2014)

#### **DNA-Based Tests for Cancer:**

(1) Improved Screening, Early Detection, and Diagnosis(2) 'Liquid Biopsies" for Treatment Monitoring









### **Therapeutics**



## Genome Sequencing, Molecular Diagnostics and "Targeted" Anti-Cancer Drugs

Trastuzumab (Herceptin®)

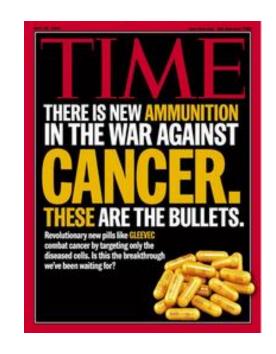


FDA-approved 1998

Imatinib (Gleevec®)

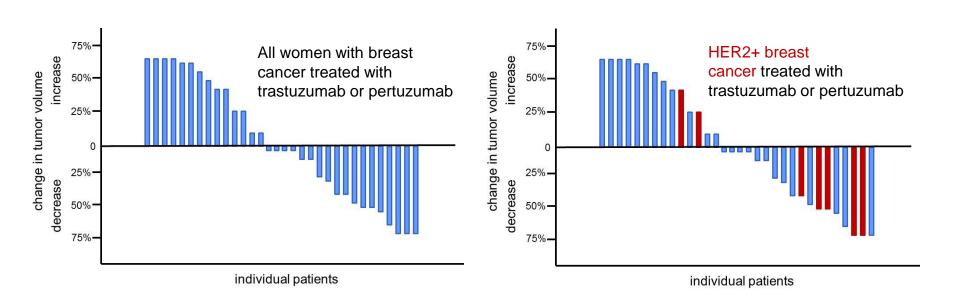


FDA-approved 2001



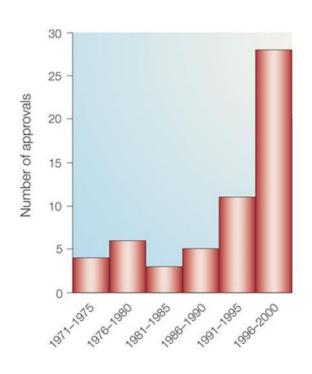
### "Waterfall Plots" Show Individual Differences in Responses to Cancer Treatments Attributable to Differential Sensitivities of Cancers with/without Specific Acquired Gene Defects

Breast Cancers with/without HER2 Amplification
Treated with Trastuzumab or Pertuzumab



### **Accelerating Pace** of Anti-Cancer Drug Discovery, Development, and Approval\*

Oncology Drug Approvals by the Food and Drug Administration

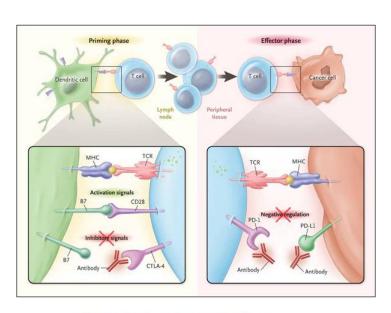


- 12 oncology approvals in 2013
- 10 oncology approvals in 2014
- 8 oncology approvals so far in 2015

### **Immunotherapeutics**



#### Immune Checkpoint Inhibitors Transforming Cancer Care: Development of Ipilumumab, **Nivolumab, and Pembrolizumab\***

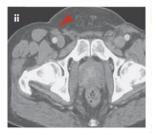


Patient with Melanoma

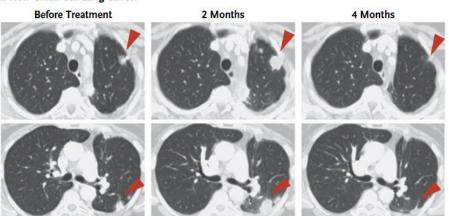
**Before Treatment** 



6 Months

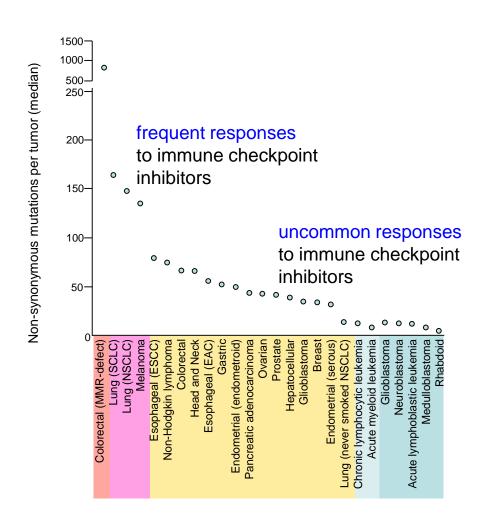


Patient with Non-Small-Cell Lung Cancer

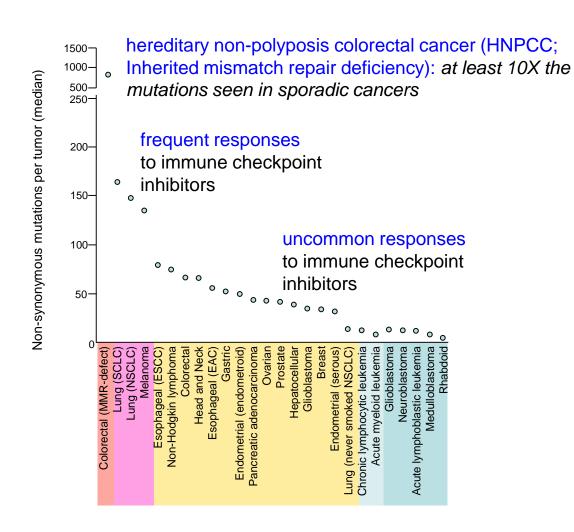


\*Topalian SL et al. New Engl J Med 366: 2443-54 (2012)

### Acquired Protein-Changing Gene Mutations and Responses to Immune Checkpoint Inhibitors

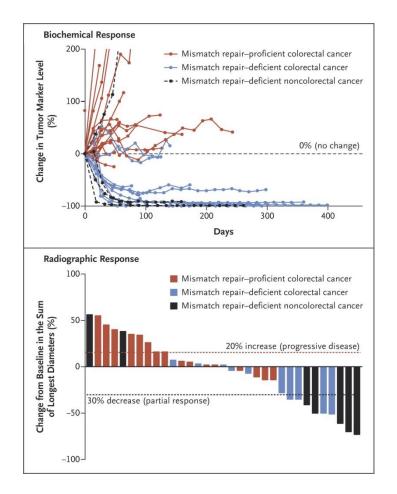


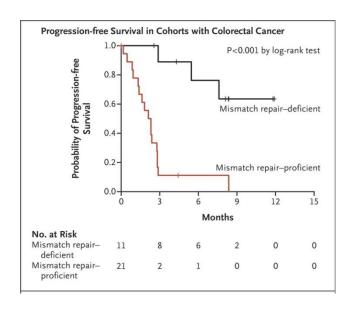
### Acquired Protein-Changing Gene Mutations and Responses to Immune Checkpoint Inhibitors



# Cancers from Families with HNPCC (Mismatch Repair Deficiency): an Indication for Immune Checkpoint Inhibitors?

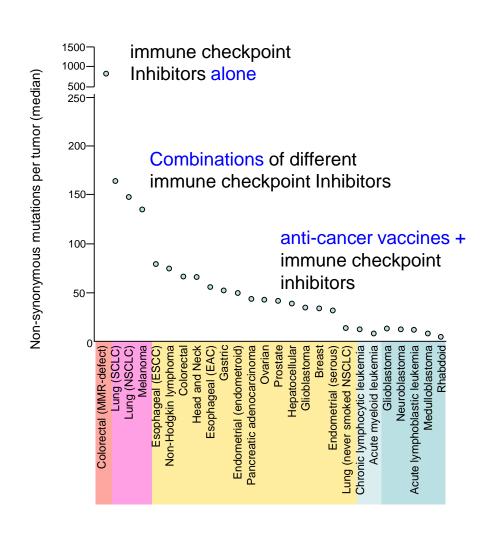
Clinical Trial of Pembrolizumab for Cancers with and without Mismatch Repair Defects\*





\*Le DT et al. N Engl J Med 372: 2509-20 (2015)

### Future Best Uses of Immune Checkpoint Inhibitors in Cancer Treatment



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